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# Section F: Site Visit and Interview Information

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## Introductory Information

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### Objectives of the Site Visit and Interviews

The MEAC accreditation process includes a site visit to the institution and interviews of students, graduates, faculty, administrative staff and other relevant parties to verify that the information provided in the Self-Evaluation Report (SER) is accurate and complete and that the program or institution is in compliance with MEAC standards. Each site visit will include a standard list of audits, interviews, and other ways of gathering information as detailed below. The site visit will also include follow-up on any particular concerns identified during MEAC's review of the SER and/or comments received from third parties. The site visit may also include gathering of information related to other accreditation matters such as substantive change applications, annual report follow-up, and/or complaints filed with MEAC against an accredited institution or program.

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### Procedures Used by the Site Visitors

The site visit is conducted by members of the Accreditation Review Committee (ARC) appointed to evaluate the institution's or program's compliance with MEAC Standards with support from MEAC staff. Site visits are typically two to three days in length depending on the size and complexity of the institution to be visited, travel considerations and the availability of key people. Interviews may take place before, during and/or after the site visit.

MEAC works with the institution to establish the best time for the site visit and a tentative schedule of activities for the actual visit. During the visit, ARC members, with support from MEAC staff, will audit files, examine records, tour facilities, and conduct interviews. They will use standardized forms to organize and document their work.

At the end of the visit, the site visitors will provide a verbal summary of their findings to representatives of the institution, reporting its strengths and weaknesses in regard to compliance with the standards. A written report summarizing the results of the ARC's review of the SER, site visit and interviews will be prepared by the ARC and sent to the school. The institution will have an opportunity to respond to the report and to provide any missing or new information before the ARC's final report is sent to the MEAC Board of Directors for an accreditation decision.

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### Responsibilities of the Institution/Program

The institution will be asked to provide several potential dates for the site visit. The primary person responsible for MEAC accreditation at the institution/program must be on-site and available throughout the site visit. Other individuals responsible for the kinds of information to be verified during the site visit must also be available on-site or readily accessible by phone for any questions that may arise.

Prior to the visit, the institution will be asked to provide current contact information (phone numbers and/or email addresses) for the following:

- All students and former students listed on the Student Completion and Retention Report submitted with the SER
- Any new matriculating students enrolled since the SER was submitted
- All graduates listed on the Graduate Placement Report submitted with the SER
- All faculty members, including preceptors, listed in the Faculty Table submitted with the SER
- Any new faculty who began teaching since the SER was submitted.

The site visitors will need a large table or desk(s) in a quiet place to do their work and a private space to conduct interviews. All files, records, and other documentation to be reviewed should be current and readily accessible.

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## Responsibilities of MEAC

MEAC will provide the institution with a site visit schedule and additional instructions in advance of the site visit.

MEAC will make all travel and lodging arrangements for the site visitors, but may ask the institution to provide a list of affordably priced lodging options, driving instructions and so on.

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## Site Visit and Interview Detail

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### ARC Responsibilities during the Site Visit and Interviews

The tasks below will be performed during the site visit itself and in interviews that may take place before, during or after the site visit. When the term audit is used in this context, the site visitors will randomly select 10% of the total in that category for review. If the category is small enough that selecting 10% of files would result in fewer than 3 files, the ARC will review a minimum of 3 files. They may review more than the minimum or even all of the files if their initial audit indicates a need for further verification, or to follow up on concerns raised in the SER or other parts of the review.

The items listed below happen as part of each site visit (unless a given benchmark is not applicable). As described above, additional audits/observations/interviews may be part of the site visit based on the ARC's review of the SER and other materials.

### **Standard I: Mission, Program Assessment and Student Achievement**

#### **I.C1, I.C2:**

- Audit student and/or graduate files to verify data provided in the Student Completion and Retention Report.

**I.C3:**

- Audit graduate files to verify data provided in the Graduate Placement Report.

**I.C4:**

- Audit graduate files to verify data provided in the Graduate Placement Report. They will look for documented evidence such as copies of NARM certification, state/provincial licensure or records of website or phone confirmation with certifying or licensing authorities. Site Visitors may also contact certifying or licensing authorities to verify the institution's reports. Site Visitors may also look for evidence (e.g. midwife's business website, brochure or yellow pages listing or confirmation from an employer or colleague) that the graduate is working as a midwife or in related fields or is continuing her education in related fields.

**Standard II: Curricula****II.A3:**

- Audit curriculum files to verify information provided in the Curriculum Checklist of Essential Competencies Worksheet. (Audit a minimum of 10% of competencies—proportion of courses selected depends on the organization of the curriculum.)

**II.A4:**

- Audit student and/or graduate files or other documentation to verify that students obtain the clinical experience required for national certification by NARM as indicated in the NARM Clinical Experiences Requirements Chart.

**II.B1:**

- Audit curriculum files to verify that syllabi clearly specify learning objectives, learning activities, learning resources and evaluation tools/methods. This audit includes courses offered by distance or correspondence education.
- Interview students and faculty to verify that course materials distributed to students contain the required information.

**II.B4:**

- Review curriculum files for the course(s) listed in the SER to verify that students are introduced to the Midwives Model of Care™.

**II.B5:**

- Interview students to verify that students engage in learning activities designed to prepare students to provide midwifery care to all mothers, babies, and families, including individuals from populations and cultures different than her own.

**II.C1:**

- Audit student and/or graduate files to verify documentation of competencies as indicated in the Curriculum Checklist of Essential Competencies Worksheet. (Audit a minimum of 10% of skill/ability competencies.)

**II.E1: (Institutional + degree-granting only)**

- Audit curriculum files, admissions records, transcripts or other permanent student records or other documentation to verify that students obtain the general education components described by the institution.

**II.E2: (Institutional + degree-granting only)**

- Audit course files, student and/or graduate files, or other evidence to determine if the stated criteria were applied when assessing the level of study and quality of work required for the degree(s) offered.

**II.E3: (Institutional + master/doctoral degrees only)**

- Review recent projects, theses or dissertations to determine if these criteria were applied when assessing student work.

**Standard III: Faculty****III.A1:**

- Audit faculty files to verify information provided in the Faculty Table. Site visitors will look for documentation that includes current relevant certification and/or licensure, as well as documentation of meeting the 2-year experience requirement. If the institution/program has made any exceptions to the experience requirements, site visitors will review supporting documentation justifying the faculty member's qualification.
- Interview faculty members to verify qualifications, including minimum of 2 years of experience.

**III.A2:**

- Audit faculty files to verify information provided in the Faculty Table. Site visitors will look for evidence of degrees/certificates such as transcripts or diplomas, as well as documentation of meeting the 3-year experience requirement as appropriate.
- Interview faculty members to verify qualifications.

**III.A3:**

- Audit faculty files to verify information provided in the Faculty Table.
- Interview faculty members to verify qualifications.

**III.A4:**

- Audit faculty files to verify information provided in the Faculty Table.
- Interview faculty members to verify qualifications.

**III.B1:**

- Interview faculty members to verify that they receive the required training and orientation.

**III.B2:**

- Interview faculty members to verify that they have the required opportunities.

**III.B3 (Distance education only):**

- Interview faculty members to verify that they receive training, assistance, and support.

**III.C1:**

- Audit faculty files to verify that performance evaluations have been completed and that any weaknesses have been addressed, including those related to distance or correspondence education teaching, if applicable.
- Interview faculty members to verify that they are regularly evaluated.

**III.C2:**

- Interview students, graduates and faculty to verify that faculty is adequate to support student achievement of program goals, including in distance or corresponding education courses, if applicable.

**III.C3:**

- Interview faculty members to verify that they are managed, supported, and monitored by a midwife.

**III.D1:**

- Interview faculty members to verify that they have the right to participate in the listed activities, and to verify participation.

**III.D2:**

- Audit faculty files (including those of preceptors) to verify that job descriptions or other relevant documents are current and specify rights and responsibilities, including any related to distance or correspondence teaching, if applicable.

**III.D3:**

- Interview faculty members to verify that they have the opportunity to work cooperatively in the facilitation, direct observation, and evaluation of students' learning.

**III.E1: (Institutional + degree-granting only)**

- Audit course instructor files to verify information presented in Faculty Table.

**III.E2: (Institutional + degree-granting only)**

- Examine faculty files to verify that qualified faculty supervise course instructors who do not hold the degrees described.
- Interview faculty members to verify that those without degrees at the degree level to which they are teaching or higher are appropriately supervised.

**Standard IV: Facilities, Equipment, Supplies and Other Resources****IV.A1, IV.A2, IV.A4:**

- Tour facilities to observe classrooms, teaching aids, equipment and supplies as described in the SER. When all or part the midwifery education program is delivered through distance learning methods, site visitors will observe examples of methods used for course instruction and technical support available to students and faculty.
- Interview students and faculty to verify that facilities, teaching aids, equipment and supplies are adequate to meet students' needs and properly maintained, and that universal precautions, hazardous waste and hazardous materials management protocols are used as described. When all or part of the midwifery education program is delivered through distance learning methods, Site Visitors will interview students and faculty to verify that the methods, technology and support available is adequate to meet student needs.

**IV.B1, IV.B3:**

- Tour the library to verify that resources are current and adequate and references include, at a minimum, those specified in Benchmark IV.B1.
- When students and/or faculty are not regularly on-site, verify how students have access to the library. (Applies to institutions/programs with distance or correspondence education components)
- Interview students and faculty to verify that the library resources are current and adequate to meet their needs and that the required references are available to them.
- Interview students and faculty who participate in distance or correspondence education (if applicable) to verify that they have access to the library resources.

**IV.B2:**

- Interview students and faculty to verify that they have access to the required training and information.

**IV.B4:**

- Interview students to verify that they learn appropriate methods for online knowledge acquisition.

**IV.C1:**

- Audit clinical site files to verify the information provided on the clinical site table.
- Interview students, graduates, and administrative staff to verify that the institution/program follows through on the stated plan for assuring sufficient clinical sites to meet the needs of students who are ready for clinical training.

**IV.C2:**

- Interview students to verify that clinical site facilities, equipment, and supplies are sufficient.

**IV.C3:**

- Audit clinical site files (or other appropriate documents) for evidence of ongoing review.

**IV.C4:**

- Audit clinical site files to verify that agreements or other documentation used by the institution verify that clinical site facilities, equipment and supplies meet the safety standards as described in the agreements.

**IV.D1:**

- Tour administrative office facilities to observe that facilities, equipment, technology and supplies are as described in the SER and meet the needs of the program/institution.
- Interview administrative staff to verify that administrative office facilities, equipment, technology and supplies meet the program's/institution's needs.

**IV.D2:**

- Interview technology staff to verify information presented in SER.

**IV.D3, D4, D5: (Distance education only)**

- Interview technology staff to verify information presented in SER.

**IV.D6:**

- Interview faculty, staff, and students to verify that they are supported in the development and use of new technologies.

**IV.E1: (Institutional + degree-granting only)**

- Interview students, graduates and faculty to verify that library resources are sufficient to provide for advanced scholarship and research.

**Standard V: Governance, Financial Management and Administrative Capacity  
(Institutional Version—see below for Programmatic Version)****V.A1: (Institutional)**

- Interview board members to verify that governance occurs as described in the SER.

**V.B1: (Institutional)**

- Examine financial records, meeting minutes and other documentation to verify that policies and procedures are followed in each of the areas listed.
- Interview students, including those participating in distance or correspondence education if applicable, to verify that students are provided with receipts and have access to their ledgers on a timely basis.

**V.C2: (Institutional)**

- Audit administrative staff files to verify that job descriptions and employment contracts are current and that staff meets the qualifications established by the institution. If applicable, verify that job descriptions and employment contracts contain references to any specific responsibilities relevant to distance or correspondence education.
- Interview administrative staff to verify administrative functions (including, if applicable, administrative functions specific to distance or correspondence education) are performed as described in the SER.

**V.C4: (Institutional)**

- Audit administrative staff files to verify that annual evaluations are performed as described in the SER.

**V.C5: (Institutional)**

- Review relevant evidence that the annual review of administrative capacity is carried out as described in the SER.

**V.C6: (Institutional)**

- Verify that records retention is carried out as described in the SER.

**V.D2: (Institutional)**

- If applicable, verify that institution remains in good standing with any other agencies by which it is accredited.

**V.D3: (Institutional)**

- Verify that student transcripts are protected from damage or loss, securely stored, and made permanently accessible in compliance with FERPA.

**Standard V: Governance, Financial Management and Administrative Capacity  
(Programmatic Version—see above for Institutional Version)****V.A1: (Programmatic)**

- Interview appropriate institutional staff to verify that the program participates in governance as described in the SER.

**V.B1: (Programmatic)**

- Interview appropriate institutional staff to verify that the program has adequate institutional support as described in the SER.

**V.C2: (Programmatic)**

- Audit administrative staff files to verify that job descriptions and employment contracts are current and that staff meets the qualifications established by the institution. If applicable, verify that job descriptions and employment contracts contain references to any specific responsibilities relevant to distance or correspondence education.

- Interview administrative staff to verify administrative functions (including, if applicable, administrative functions specific to distance or correspondence education) are performed as described in the SER.

**V.D1: (Programmatic)**

- Verify that institution remains in good standing with its institutional accreditor.

**V.D3: (Programmatic)**

- If applicable, verify that program remains in good standing with any other agencies by which it is accredited.

**V.D4: (Programmatic)**

- Verify that student transcripts are protected from damage or loss, securely stored, and made permanently accessible in compliance with FERPA.

**Standard VI: Student Services****VI.A1:**

- Interview students to verify that the student services listed are provided as described in the SER, including to students participating in distance or correspondence education, if applicable.

**VI.B1: (Distance education only)**

- Interview students to verify that technical assistance and technical support are provided as described in the SER.

**Standard VII: Student Affairs****VII.A1:**

- Audit student files and/or admissions files to verify that policies and procedures for the selection and admission of students are followed, including for students who plan to enroll in distance or correspondence education, if applicable.

**VII.A2:**

- Audit student files to verify that individual student enrollment agreements are current and complete. This includes students enrolled in distance or correspondence education, whose enrollment agreements must reference the nature and scope of the distance or correspondence program.
- Interview students to ensure that they are aware of and understand the terms of their enrollment agreements.

**VII.A3 (Programmatic)/VII.A4 (Institutional):**

- Audit student files and/or transcripts to verify that the policies and procedures for transfer of credit, prior learning assessment, and advanced placement are followed as described in the SER.

**VII.C1:**

- Audit student files, graduate files, and/or transcripts (including those of students participating in distance and/or correspondence education, if applicable) to verify that the policies and procedures for monitoring, enforcing, and notification of satisfactory academic progress are followed.

**VII.C2:**

- Audit student files, graduate files, and/or transcripts (including those of students participating in distance and/or correspondence education, if applicable) to verify that the policies and procedures regarding academic honesty are followed.

**VII.D1: (Institutional)**

- Audit transcripts (including those of students participating in distance and/or correspondence education, if applicable) to verify that they have been prepared and maintained as described in the SER.

**VII.D2 (Institutional)/VII.D1 (Programmatic)**

- Examine survey forms, meeting minutes, and other evidence provided by the institution/program to verify that students (including, if applicable, those enrolled in distance or correspondence education) participate in curriculum evaluation, program planning and evaluation, faculty evaluation, student services evaluation, and policy-making activities.
- Interview students (including, if applicable, those enrolled in distance or correspondence education) to verify their participation in program planning and evaluation, faculty evaluation, student services evaluation, and policy-making activities.

**VII.D3: (Institutional)**

- Audit student files (including those of students participating in distance and/or correspondence education, if applicable) to verify tuition and fees cancellation and refunds are handed as indicated in the SER.

**Standard VIII: Measure of Program Length****VIII.A1:**

- Audit graduate files and/or transcripts to verify that the graduates complete the program within the minimum and maximum timeframes stated in the SER.

**VIII.B1:**

- Audit curriculum, student files, and/or graduate files to verify that credits are awarded based on the required formula described the institution and that credit hours awarded for preceptorships or other clinical instruction must be based on a record of a minimum number of actual clinical contact hours.

**VIII.C1: (Institutional + degree-granting only)**

- Audit curriculum files and graduate transcripts or other permanent student records to verify that degree programs meet the minimum total semester/quarter credits.

### **Standard IX: Complaints and Grievances**

#### **IX.A1:**

- Interview students, faculty, and staff to verify that the complaint and/or grievance policy is made available to them.

#### **IX.A2:**

- Interview students, faculty, and staff to verify that individuals are not discriminated against as a consequence of making a complaint.

#### **IX.A3:**

- Audit complaint and grievance records to verify that policies and procedures are followed, applied fairly and consistently and protect confidentiality (including for students who are enrolled in distance or correspondence education, if applicable).

#### **IX.B1:**

- Review complaint and grievance records to verify that these records are available for MEAC inspection and retained for at least seven years.

#### **IX.C1:**

- Interview students to verify that they have been informed about the grievance policies and contact information for MEAC and any relevant state regulatory bodies.

### **Standard X: Compliance with the Institution's Responsibilities under Title IV of the Higher Education Act**

**(Applies only where MEAC is the institutional accreditor and the institution participates in Title IV programs)**

#### **X.B2:**

- Interview students (including those enrolled in distance and/or correspondence education, if applicable) to verify that they have access to the designated employee(s) responsible for student financial aid programs.
- Interview the designated employee(s) responsible for student financial aid programs to verify that they administer the program and are available to answer student questions.

#### **X.B3:**

- Interview administrative staff to verify separation of duties between awarding of Title IV funds and disbursing of funds.

#### **X.B4:**

- Interview third-party servicer (if applicable) to verify responsibilities as described in SER.

#### **X.B5:**

- Interview students (including those enrolled in distance and/or correspondence education, if applicable) to verify that they are informed of their financial aid options, rights, and responsibilities as described in SER.

**X.C1:**

- Interview the designated individual(s) responsible for the student financial aid program to verify that they have been trained and there are plans for on-going training.
- Review the personnel file of designated individual(s) responsible for the student financial aid program or other relevant documentation to verify training on financial aid rules and regulations.

**X.C2:**

- Interview students (including those enrolled in distance and/or correspondence education, if applicable) to verify that the institution communicates information that may impact a student's Title IV eligibility as described in SER.

## The Site Visit Schedule

Site visits vary in length from two to three days depending on the size and complexity of the institution/program to be visited, travel considerations and the availability of key people. Below is an example of a two-day site visit for a relatively small institution. The actual schedule for a specific site visit will be developed by MEAC staff with input from the institution/program and the ARC.

<b>Sample Site Visit Schedule</b>	
<b>Day One</b>	
8:30	ARC and MEAC staff meet to review materials, schedule, questions, roles
9:30	ARC and MEAC staff meet with institution/program representatives for introductions, review/revise plan, sign statement of professionalism
10:00	Meet with Program Director
10:15	Tour facilities, including library, and observe distance or correspondence education delivery methods if applicable
11:00	Audit curriculum/course files
12:00	Lunch
1:00	Audit curriculum/course files; review recent projects/theses if applicable
2:00	Audit student and graduate files
4:00	Interview students, graduates
5:00	ARC and MEAC staff meet with institution/program representative to review progress, revise next day plan if necessary
<b>Day Two</b>	
8:30	Audit faculty files
10:30	Interview faculty, staff
12:00	Lunch
1:00	Audit fiscal and administrative files, complaint/grievance records
2:00	ARC and MEAC staff meet for systematic, standard by standard review to determine if anything missing, need follow-up?
2:30	ARC and MEAC staff meet with institution/program representative to check-in and follow-up questions
3:00	Complete any incomplete tasks, obtain missing information, prepare exit report
4:30	ARC and MEAC staff meet with institution/program representatives to provide verbal exit report and review next steps

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## Information from the Accreditation Review Training Manual

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### Ethics of Site Visiting

*The following instructions are from the Site Visitors Handbook and are included here to inform institutions/programs about how site visitors are prepared for the site visit.*

Ethical behavior during site visiting involves clearing your mind and heart of preconceptions, prejudices, etc., and looking for and substantiating the facts asked for in the SER. You have a right to take care of your personal needs, eating and drinking, bathroom, etc. Otherwise, you are committed to concentrating wholly on your task and on the school. Keep your feelings to yourself. Speak only based on the facts as you find them; ask for clarification when you're unsure. You do not decide whether the school is accredited. You are members of a MEAC Accreditation Review Committee, qualified to evaluate midwifery educational institutions or programs, and your role is to perform a complete review. You will report your review and recommendation about the school's accreditation to the Board, which will make the final decision.

1. Conflict of interest

If you have any conflict of interest with the school, e.g., you have friends who go there, relatives who have graduated from there, assisted them in their programs, utilized their services, have strong disagreements with them, etc., you must disqualify yourself as a site-visitor. Contact MEAC if you are unsure whether you have a conflict of interest.

2. Confidentiality

All information contained in the SER and discovered at the site visit is inviolably confidential. This information can be discussed with the school itself, your co-visitor(s), the MEAC Accreditation Review Committee and the Board of Directors. The information will be used solely for the purpose of evaluating the institution's or program's compliance with MEAC requirements. The information that you obtain during site visits and through the SER may not be communicated, copied, utilized, or otherwise discussed. Any restrictions on the provision of otherwise confidential information may be superseded by the requirements of government agencies or national accrediting agencies.

3. Accuracy

Your report must be accurate, substantiated by written and physical materials and face-to-face interactions with the people and materials directly related to the site visit. Information based on personal interactions must contain the person's name and the time and place of the interaction, if such documentation is used in the report.

4. Feelings

Put your feelings aside, whether positive or negative, and stick to the facts. Be calm and methodical. Be an advocate for the program; search diligently for its strengths, be factual and forthright about weaknesses and deficiencies. Be encouraging. Weaknesses and deficiencies can be corrected. Accreditation facilitates corrections of weaknesses and deficiencies by identifying them, providing requirements for correction and deadlines for corrective implementation.

5. Know your roles and responsibilities

As a site visitor, you are charged with identifying compliance with the Standards. The school may ask you to provide information as a “consultant,” that is, ask for ideas on how you would address a problem that is beyond the scope of meeting the Standards. Be clear in your role as a site visitor.

6. Responsibility for expenses

Except where paid for directly by MEAC, site visitors are responsible for paying for their own meals and incidental expenses, which will be reimbursed by MEAC. MEAC will pay for all transportation and lodging out of the site visit fees.

Your ethical behavior ensures the school’s fair and correct treatment by MEAC. MEAC’s intention is to accredit schools, not prevent them from accreditation. Your advocacy and fairness is crucial to the success of MEAC’s mission and to the multiplicity and variety of educational opportunities for midwives.

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## Basic Concepts of Accreditation

*The following instructions are from the Site Visitors Handbook and are included here to inform institutions/programs about how site visitors are prepared for the site visit.*

1. The persons being served by your site evaluation are the midwifery students, the midwives of tomorrow, and ultimately, the women and their families who are served by these midwives.
2. These Standards were developed through a consensus process involving midwifery educators, students and midwives from all over the United States. They reflect a general agreement about what a program must do in order to assure a high quality education and service to the students, as well as what is required by the U.S. Department of Education.
3. Important: The Standards are your yardstick for measuring whether a program is acceptable. That is, it is the “C” grade or basic level of acceptability, not what you would consider the maximum, highest or ideal level of operation for that program.
4. The Standards are expressed in broad terms to allow for flexibility and diversity within programs. The goal of accreditation is to preserve the individuality of programs and, at the same time, make sure they meet certain minimum standards. Remember that there will be a variety of ways in which different programs meet the Standards.
5. Study the Standards carefully. To ensure the consistency of your interpretations, evaluate all programs based only on the requirements stated in the Standards. When in doubt, read the Standard. What does it ask for? Refer to the Benchmark Scoring Rubric. This will inform you of MEAC’s requirements for each Standard. You may only require that the school meet the Standard as stated. If a question remains about the meaning of a Standard, call MEAC headquarters before proceeding. If you disagree with a Standard or feel it is in need of revision, put this in writing to the MEAC Board of Directors. Changing a Standard is serious and requires a specific process that cannot occur on a Site Visit.
6. The site evaluation is not the time to argue about the Standards or to discuss the school director’s objections to them at length. The Standards are re-assessed and revised periodically and suggestions for revision should be directed to MEAC.

## Understanding the Site Evaluation Process from Both Sides

*The following instructions are from the Site Visitors Handbook and are included here to inform institutions/programs about how site visitors are prepared for the site visit.*

1. **The Site Evaluation Process can be a stressful event for the program.** It is a developmental process, not a punitive process. These institutions or programs open themselves to others for evaluation of their performance, integrity and quality assurance, and as such, are committed to improvement.
2. The procedures for accreditation are complex, and you may be asked questions regarding the timelines or mechanisms involved. Although it is important to understand the overview of the process, detailed questions should be referred to MEAC for clarification.
3. You are the eyes and ears of MEAC as a site visitor. During the accreditation process, this is the best opportunity to see if the institution or program “walks their talk,” so to speak. A weakly written Self Evaluation Report (SER) doesn’t mean the institution or program is deficient, just as an outstanding SER doesn’t guarantee the program meets the Standards. This site visit is designed to verify that the program is doing what the SER claims it is doing.